



*2155*  
*RCE*

PATENT APPLICATION  
Attorney's Do. No. 2705-137

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

CERTIFICATE OF MAILING UNDER 37 CFR 1.8

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE WITH SUFFICIENT POSTAGE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO MAIL STOP RCE, COMMISSIONER FOR PATENTS, P.O. BOX. 1450, ALEXANDRIA, VA 22313-1450 ON JUNE 9, 2004.

Ariel S. Rogers  
(SENDER'S PRINTED NAME)

*Ariel S. Rogers*  
(SIGNATURE)

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JUN 16 2004

In re patent application of: Peter M. GITS and Dale J. SEAVEY

Serial No. 09/698,779

Technology Center 2100

Filed: October 27, 2000

For: SMART SECRETARY

Examiner: Kevin T. BATES

Group Art Unit: 2155

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

MAIL STOP RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.

1. Submission required under 37 C.F.R. § 1.114

a. ☐ Previously submitted:

☐ Consider the amendment(s) reply under 37 C.F.R. § 1.116 previously filed on \_\_\_\_\_.

☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed

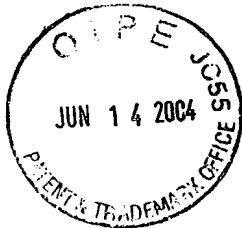
06/16/2004 WABDELRI 00000120 09698779

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02 FC:1201  
03 FC:1202

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72.00 OP

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on \_\_\_\_\_.

☐ Other:

b. ☒ Enclosed is:

☒ Amendment/Reply

☐ Affidavit(s)/Declaration(s)

☒ Information Disclosure Statement (IDS)

☐ Other

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2. **Miscellaneous**

☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; fee under 37 C.F.R. § 1.17(i) required).

☐ Other:

3. **Fees:** (Note: The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed)

☒ RCE fee required under 37 C.F.R. § 1.17(e)

☒ \$770 large entity

☒ \$158 additional claims fee (4 new claims, 1 independent)

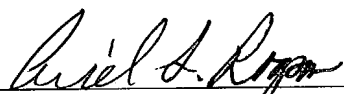
☒ PTO Form 2038 authorizing credit card payment is attached.

☒ Any deficiency or overpayment should be charged or credited to deposit account number 13-1703. A duplicate copy of this sheet is enclosed.

Customer No. 20575

Respectfully submitted,

MARGER JOHNSON & McCOLLOM, P.C.

  
Ariel S. Rogson, Reg. No. 43,054

MARGER JOHNSON & McCOLLOM, P.C.  
1030 SW Morrison Street  
Portland, OR 97205  
503-222-3613